Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								O9751633						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS								RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.0		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		٠ ٥			X\$ 9=			OR	X\$18=	1	
INDEPENDENT CLAIMS			Ƴ minus 3 =		1			X40=			OR	X80=	22	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					1				1270		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=			OR	+270=	790	
CLAIMS AS AMENDED - PART II								TOTAL			OR	TOTAL OTHER		
(Column 1) (Column 2) (Column 3)								SMAL	LE	NTITY	OR	SMALL	-	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	. [OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=	1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			OR	+270=		
							l	TOTA	AL			TOTAL		
	(Column 1) (Column 2) (Column 3)						1	ADDIT. FE	EL		J'''	ADDIT. FEE		
NDMENT B		CLAIMS REMAINING		HIGH	EST		ſ		T	ADDI-			ADDI-	
	-1	AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
NDW	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
AME	Independent	*	Minus	***	- OL 4114	-		X40=	1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľ	+135=	_	-	OR	+270=		
								TOTA	AL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)									EL		Jon	ADDIT. FEE		
AMENDMENT C	,	CLAIMS		HIGH	IEST		lr		_	ADDI-			ADDI-	
	1	REMAINING AFTER AMENDMENT		PREVIO PAID		PRESENT		RATE	-	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=] [X\$ 9=			OR	X\$18=	,	
	Independent	•	Minus	***		=		X40=	7		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╅					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=		
**	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												L	
		nber Previously Pa					er fou	und in the	арр	ropriate bo	x in co	lumn 1.		

Application or Docket Number